

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.L.P.E. CLASSIFIER			
FORMALITY REVIEW	BZ	297	01-31-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 ✓ Allowed I Interference
 (Through numerals) Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

Claim	Date	Claim	Date	Claim	Date
1		61		121	
2		62		122	
3		63		123	
4		64		124	
5		65		125	
6		66		126	
7		67		127	
8		68		128	
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47		107		167	
48		108		168	
49		109		169	
50		110		170	
51		111		171	
52		112		172	
53		113		173	
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56		116		176	
57		117		177	
58		118		178	
59		119		179	
60		120		180	

If more than 150 claims or 10 actions
 staple additional sheet here

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